MTE119159226 / Trans Eurokars Pte Ltd - Sungei Kadut ENTRY DATE & TIME: 03/12/2019 09:14 SUBMITTED BY: Catherine Chua Siew Quek

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 03/12/2019 10:02

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid

ACCIDENT STATEMENT

Date Of Report 03/12/2019 09:14

Date Of Accident 27/11/2019 08:30

Exact Location Of Accident JALAN KE/7 BANDAR COUNTRY HOMES 48000 RAWANG

Country/State of Loss MALAYSIA/SELANGOR DARUL EHSAN

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLA8808L

Insured/Policyholder

Name Of Registered Owner TEO BENG CHAI

NRIC No S2584771G

Email Address TONYTEO8808@GMAIL.COM

Mobile Phone No (LOCAL) +65-90063399

Alternative Phone No Others-90063399

Vehicle Particulars

Manufacturer MAZDA

Model MAZDA6 2L SDN

Exact Purpose for which vehicle was being used at

time of accident

PRIVATE

Are you claiming under your own insurance policy

for repair to your vehicle?

YFS

If No, Please state action to be taken

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number

Cover Note Number

Driver

Name of Driver TEO BENG CHAI

 NRIC No
 S2584771G

 Date Of Birth
 06/01/1961

 Occupation
 INDOOR

 Date Of Driving Pass
 28/04/1986

Driving Experience 33 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90063399

Fax Number

Contact Number OTHERS-90063399

EMail Address TONYTEO8808@GMAIL.COM Address 88 SEA BREEZE AVENUE

Postcode 487587 Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **OWNER**

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? YFS

Foreign Vehicle Registration Number WRQ893 (PRIVATE CAR)

Number of vehicles (including own vehicle) involved

in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s)

NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 0

Details of Police Action

YES Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: SINGAPORE Police Station Address

TEL NO: 65470000 - FAX NO: Police Station Contact

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO THE ATTACHED SKETCH PLAN AND POLICE REPORT.

Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

WRQ893 Vehicle Registration Number

Vehicle Make/Model/Colour MERCEDES B170/SILVER

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver NOREIN BINTI MUSTAFA

NRIC/Passport Number

Contact Number 0123908444

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

E-FILE

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- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
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 interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers anc/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

i) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

urokars Pte Ltd

03 / 6749 4333

Name:

NRIC/FIN No.:

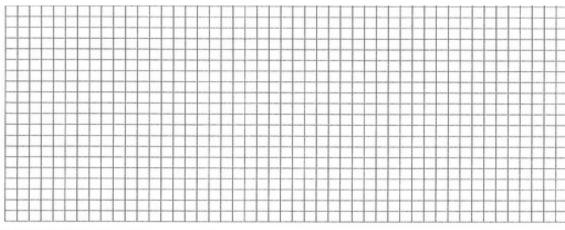
Trans

Tel: 647

GIARMC SketchPlanForm_V3

1

SKETCH PLAN



E-FILE

DESCRIBE CIRCUMSTANCES OF	THE ACCIDENT	LICENSE PLATE N	10: SLA8808L
ACCIDENT DATE: 27	119	CONTACT NUMBI	ER: 90063399
ACCIDENT TIME: 8.30)AM	EMAIL:	
LOCATION: JALAN	KE 7 BANDAR	COUNTRY }	lomes
PETER TO	POLICE RI	PT .	
		wereness of the second	
			CONTRACTOR OF STREET
NOTE: PLEASE NOTE THAT YOUR INSUR!	ER MAY HAVE 14 DAYS TIME FRAME FOR	YOU TO SUBMIT AN OWN DAM	AGE CLAIMS LINDER YOUR OWN POLICY
,	PLEASE CHECK YOUR POLICY F		
PLEASE STATE: SCLAIM OW			Y Eurokars Pts Life
DECLARATION	()	1	
I/We declare the foregoing particular	s are true in every respect.	Fax:	Close 408665 11 3003 / 6749 4333 6746 0660
Policyholder's Signature	Driver's Signature		Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN N	lo.:
GIARMC SketchPlanForm_V3			2





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20191202/7011

REPORT OF A TRAFFIC ACCIDENT

Date/Tin 02/12/20	Pate/Time Report Made: 2/12/2019 11:34		Vide Report No.: Station Dia		
Informa	nt's Particu	ulars			
	of Informant: Address: ENG CHAI 88 SEA BREEZE AVENUE S			E SINGAPORE 487587	
ID Type NRIC NO	/ ID No.:) / S25847	71G	Contact No.: Home/Office: Mobile: +6590063		
National SINGAP	Nationality: SINGAPORE CITIZEN		Email: TONYTEO8808@GMAIL.COM		
Sex: Male	Age: 58	Date of Birth: 06/01/1961	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Business Owner			Driving Licence Information: Class: 3 Date of Expiry:		

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 27/11/2019 08:30	Type of Location Service road in a housing estate
Location: Jalan KE/7, B	andar Country Homes,	48000 Rawang, Sela	angor, Malaysia	
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h

Details of Vehicle Involved							
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger	
SLA8808L	Car	MAZDA 4.	6	Red	Slightly Damaged	0	
WRQ893	Car	MERCEDES BENZ	B170	Silver		0	

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLA8808L	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800008157	31/01/2018	30/01/2020





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20191202/7011

CONTINUATION OF REPORT

Any Pedestrian II	wolved: No					
No. of Pedestrian			Use of Po	edestriar	Cross	ing: NA
Vehicle Owner	Kalendari Santania		Salar Salar			
Name	TEO BENG CHAI			ID No		S2584771G
Related Vehicle	SLA8808L (Car)		Conta	ct No.	+6590063399	
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Dis	charge	NIL	
No. of Days grant	ted Medical Leave	NIL	Degree o		NIL	

Brief Details.

My car (Mazda 6, Registration No. SLA8808L) was parked overnight at the side of the service road (outside relative's house number 35, Jalan KE7/1, Bandar Country Homes, 48000 Rawang, Selangor, Malaysia) on Tuesday (26 November 2019) night.

The next morning, Wednesday (27 November 2019) around 8.30am., I was informed by the owner of the house opposite that her daughter/daughter-in-law has accidently reversed her car out from her house and hit my car causing damage to right door and right fender.

As I was not present during the accident, the neighbour has admitted and apologized for the accident to my relative through WhatsApp on the same morning. Subsequently, I have also communicated with her and her husband through WhatsApp (record available).

4.

The driver's particulars of the other party is as follows : Name : Ms Norein binti Mustafa Contact No. : 0123908444 Car details : Silver Mercedes B170, Regn No. WRQ893





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20191202/7011

CONTINUATION OF REPORT

Sketch Plan						
Informant is	not a	bе	to	provide	sketch	plai

NP168

Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Date/Time: 02/12/2019 11:34
Classification Of Case:



It's inconv€ 28 NOVEMBER 2019 >, I was a malaysian and did my university days in KL. Graduated in 1983 and then came over to Singapore in 1984 and never been back in KL since then.

Yesterday was my first trip back to KL after all these years 14:50 🗸

let me discuss internally and update u 14:51

Sure....terima kasih 14:53 W

Can you give me your email adddess 19:42

tonyteo8808@gmail.com 20:17 J

Hi Teo. I am very sorry that the amount to be paid is way beyond our means and also overshot the insurance excess of my car. Therefore I have no choice but to pay your car damages with my car insurance. I have to make a police report admitting that I have reversed my car out of our house's garage and accidently hit the right side of your car which was parked. I will also get my insurance company to communicate with yours, if you can provide me the necessary details. Sorry again for the inconveniences caused. Norein.

> Hi Norein. Noted. Please let me know what details do you need. 23:16 7

Will revert 23:17 (3) Type a messocial 111





SLA8808L







